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Date of Deposit: September 15, 2000

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PTO/SB/05 (4/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	284355-00003-1
	First Inventor or Application Identifier	
	Title	METHODS AND SYSTEMS FOR ELECTRONIC*
	Express Mail Label No.	EK473575372US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification [Total Pages 43] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the invention</li><li>- Brief Summary of the invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 1]	<b>ACCOMPANYING APPLICATION PARTS</b> 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement of Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations] 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input checked="" type="checkbox"/> * Small Entity Statement(s) filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input checked="" type="checkbox"/> Other: check	
4. Oath or Declaration [Total Pages 2] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li></ul></li></ul>		
<b>* NOTE FOR ITEMS 1 &amp; 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</b>		
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Prior application information: Examiner _____ Group / Art Unit: _____ <b>For CONTINUATION or DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		

<b>17. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or <input checked="" type="checkbox"/> Correspondence address below					
Name	David C. Jenkins Eckert Seamans Cherin & Mellott, LLC				
Address	600 Grant Street 44th Floor				
City	Pittsburgh	State	PA	Zip Code	15219
Country	USA	Telephone	412-566-1253	Fax	412-566-6099

Name (Print/Type)	David C. Jenkins	Registration No. (Attorney/Agent)	42,691	
Signature	[Signature]		Date	Sept 15, 2000


Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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<b>FEE TRANSMITTAL</b> <b>for FY 2000</b> <small>Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.</small>		<b>Complete if Known</b>	
		Application Number	
		Filing Date	
		First Named Inventor	Ganesh Mani
		Examiner Name	
		Group / Art Unit	
<b>TOTAL AMOUNT OF PAYMENT</b>	(\$) 1,005.00	Attorney Docket No.	284355-00003-1

<b>METHOD OF PAYMENT</b> (check one)		<b>FEE CALCULATION</b> (continued)																																																																																																																																																																																																																					
<b>1.</b> <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  Deposit Account Number: 02-2556  Deposit Account Name: Eckert Seamans  <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17		<b>3. 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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	David C. Jenkins	Registration No. (Attorney/Agent)	42,691
Signature		Telephone	412-566-1253
		Date	Sept 15, 2000

**WARNING:**

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

09/662958

**STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.9(f) & 1.27(b))--INDEPENDENT INVENTOR**

Docket Number (Optional)  
284355-00003-1

Applicant, Patentee, or Identifier: Ganesh Mani

Application or Patent No.: \_\_\_\_\_

Filed or Issued: \_\_\_\_\_

Title: METHODS AND SYSTEMS FOR ELECTRONIC AGENCY IN PERFORMANCE OF SERVICES

As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:

- ☒ the specification filed herewith with title as listed above.
- ☐ the application identified above.
- ☐ the patent identified above.

I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ No such person, concern, or organization exists.
- ☐ Each such person, concern, or organization is listed below.

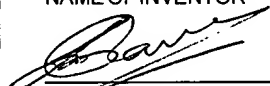
Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

GANESH MANI  
NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR

  
Signature of inventor

Signature of inventor

Signature of inventor

Sept 13 00  
Date

Date

Date